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Subtle early clinical indicators of renal cell carcinoma: A case report highlighting insidious clinical presentation

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Abstract

Background: Renal cell carcinoma (RCC) originates from the epithelial tissue of the kidney and often presents with vague symptoms, making early detection challenging. Patients may remain functionally independent during the initial stages of the disease.

Case Presentation: A 67-year-old man after experiencing persistent back pain, decreased appetite, and unintended weight loss, imaging studies revealed a substantial renal mass with metastasis of the lungs and vertebrae. Histopathology confirmed Renal Cell Carcinoma (RCC) with International Society of Urological Pathology (ISUP) grade 2. At the time of diagnosis, the patient retained the ability to perform daily activities and managed self-care, corresponding to an ECOG Performance Status of 0. He received targeted therapy of Tablet. Pazopanib for approximately one year, with regular follow-up and nursing support.

As the disease progressed, he developed neurological symptoms, and subsequent imaging detected brain metastasis. His consciousness gradually declined, with a Glasgow Coma Scale (GCS) score of 8/15, and he became entirely dependent on caregivers, consistent with an ECOG Performance Status of 4.

Outcome: Despite ongoing medical and nursing interventions, the patient's condition deteriorated, ultimately resulting in death.

Conclusion: This report illustrates the insidious onset and progressive functional decline associated with advanced RCC. Continuous monitoring using tools such as the ECOG Performance Status Scale and Glasgow Coma Scale enabled structured nursing assessment, guided care planning, and timely initiation of palliative support.

Keywords: Carcinoma, RCC, metastasis, palliative care, diagnosis